

FORM-D OMB APPROVAL UNITED STATES SEGURITIES AND EXCHANGE COMMISSION OMB Number: 3235-0076 Expires: APRIL 30, 2008 Washington, D.C. 20549 Estimated average burden hours per response 16.00 FORM D OTICE OF SALE OF SECURITIES SEC USE ONLY Prefix PURSUANT TO REGULATION D, SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION (check if this is an amendment and name has changed, and indicate change.) Name of Offering Class A Common Stock at \$0.04 per share or more ☐ Rule 504 Rule 505 ☑ Rule 506 Section 4(6) ☑ ULOE Filing Under (Check box(es) that apply): Type of Filing: Amen Imeni A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer (check if this is an amendment and name has changed, and indicate change.) Voyager Entertainment international, Inc. l'elephone Number (Including Area Code) Address of Executive Offices (Number and Street, City, State, Zip Code) (702) 221-8070 4483 West Reno Ave., Las Vegas, NV 89118 Telephone Number (Including Area Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) PROCESSED **Brief Description of Business** The company's current business plan is to design, finance, develop and manage JAN 1 0 2008 a unique new attraction to be located on the Las Vegas Strip and /or other locations Type of Business Organization corporation other (please specify): limited partnership, already formed imited partnership, to be formed business trust Month Year 0 7 9 1 ☐ Estimated Actual Actual or Estimated Date of Incorporation or Organization: Originally incorporated in ND. Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: N V reincorporated in NV 6/23/03 CN for Canada; FN for other foreign jurisdiction) **GENERAL INSTRUCTIONS** Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 When To File: A notice must be filed no later it an 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington D.C. 20549 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signature. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

States

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are

		· ·-		A. BASIC IDE	NTIFIC	ATION DATA					
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner or partnership issuers. 											
Check Box(es) that Apply:		Promoter	Œl	Benefical Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner	
Full Name (Last name first, if	indivi	dual)							•		
Hannigan, Richard L.		Ot	d Ca	et, City, State, Zip Coo	40)			-			
Business or Residence Addre				et, City, State, 22p Co.	uc)						
4483 West Reno Ave., La	Veg	as, NV 89118							_		
Check Box(cs) that Apply:		Promoter	딘	Benefical Owner		Executive Officer	Ø	Director		General and/or Managing Partner	
Full Name (Last name first, if	indivi	dual)				••					
Hannigan, Myong Business or Residence Addre	83	(Number	and Str	et, City, State, Zip Co	de)						
					,						
4483 West Reno Ave., La				5 0 16	Ø	F	Ø	Director	П	General and/or	
Check Box(es) that Apply:	Ц	Promoter		Benefical Owner		Executive Officer		Director		Managing Partner	
Full Name (Last name first, if	indivi	dual)	Í								
Jones, Tracy Business or Residence Addre	85	(Number	and Sta	et, City, State, Zip Co	de)						
4483 West Reno Ave., La	s Veg	as, NV 89111	3								
Check Box(es) that Apply:		Promoter	뎐	Benefical Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, it	findiv	idual)		<u> </u>		- ,					
Tyner, Don and Nancy											
Business or Residence Addre	85	(Number	and Sta	eet, City, State, Zip Co	de)						
9087 Highridge Drive Las	. Veoz	s. Nevada									
Check Box(es) that Apply:		Promoter	Œ	Benefical Owner	ū	Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, i	findiv	idual)			· · · · · ·						
Gluffria, Gregg								 _		··	
Business or Residence Addre	:53	(Number	and Str	eet, City, State, Zip Co	xde)						
8617 Rainbow Ridge Dr I	as V	gas 89117									
Check Box(es) that Apply:	0	Promoter	Œ	Benefical Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, i	findiv	idual)					•				
Business or Residence Addre	255	(Numbe	r and Str	eet, City, State, Zip Co	ode)						
Check Box(es) that Apply:		Promoter	Ci	Benefical Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, i	findiv	ridual)									
Business or Residence Addre	SS	(Numbe	r and St	eet, City, State, Zip Co	ode)				_		
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B. INFORMATION ABOUT OFFERING								
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?. Answer also in Appendix, Column 2, if filing under ULOE.	Yes . 🗆	No Ø						
2. What is the minimum investment that will be accepted from any individual?	Ϋ́લ	No C						
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	🗆	All States						
AL AK AZ AR CA CO CT DE DC FL GA HJ	ן מו							
IL IN IA KS KY LA ME MD MA MI MN MS	MO							
MT NE NV NH NJ NM NY NC ND OH OK OR	PA							
RI SC SD TN TX UT VT VA WA WV WI WY	PR							
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers								
(Check "All States" or check individual States).	🗆	All States						
AL AK AZ AR CA CO CT DE DC FL GA HI	ID							
IL IN IA KS KY LA ME MD MA MI MN MS	МО							
MT NE NV NH NJ NM NY NC ND OH OK OR	PA							
RI SC SD TN TX UT VT VA WA WV WI WY	PR							
Full Name (last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer	•							
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	0	All States						
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MT NE NV NH NJ NM NY NC ND OH OK OR	1 1							
RI SC SD TN TX UT VT VA WA WV WI WY								

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1 Enter the aggregate offering price of securities included in this offering and the total amount already sold.

Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \sum and indicate in the column below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security 200,000.00 ☑ Common ☐ Preferred Convertible Securities (including warrants) \$ Other (Specify 200,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 2 Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero". Aggregate Dollar Amount of Number Investors Purchases 200,000.00 Total (for filings under Rule 504 only)..... 200,000.00 Answer also in Appendix, Column 4, if filing under ULOE. 3 If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. **Dollar Amount** Type of Security Sold Type of Offering Rule 505 Regulation A Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Logal Foos....... Sales Commissions (specify finders' fees separately) Other Expenses (identify) _ Total \$0.00

and total expenses furnished in response to P	ate offering price given in response to Part C - Question art C - Question 4.a. This difference is the "adjusted grant C - Question 4.a."	l			_\$	200,000.00
each of the purposes shown. If the amount f	oss proceeds to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and chof the payments listed must equal the adjusted gross of Part C-Question 4.b above.	or eck				
			Oi Dire	ments to fficers, ectors & filiates		Payments to Others
Salaries and fees			\$		\$	-
Purchase of real estate			\$	0	\$	-
Purchase, rental or leasing and installation	of machinery and equipment		\$		\$	
Construction or leasing of plant buildings	and facilities		\$	<u> </u>	\$	-
Acquisition of other businesses (including offering that may be used in exchange for the superproperty to a margar)			s		\$	_
	nd legal).		\$		\$	65,000.00
			\$	_ 🗸	\$	69,000.00
	tion fees and related fees		\$		\$	66,000.00
		<u>-</u>	\$		\$	200,000.00
Total Payments Listed (column totals adde	d)			Ō	\$	200,000.00
	D. FEDERAL SIGNATURE			*****		
following signature constitutes an undertaking	med by the undersigned duly authorized person. If the by the issuer to furnish to the U.S. Securities and E er to any non-accredited investor pursuant to paragraphs.	xchan	ge Comn	nission, upon w	05, the ritten	request of
suer (Print or Type)	Signature			Da	te	
oyager Entertinment International, Inc.	Tund ten			7	Z -/	
* ` '''	Title of Signer (Print or Type)	_		1	21	6-07
chard L. Hannigan, Sr.	President, CEO				•	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
	30.262 presently subject to any of the disqualification provisio	_	No ☑
	See Appendix, Column 5, for state response.		
2 The undersigned issuer hereby und Form D (17 CFR 239.500) at such	rtakes to furnish to any state administrator of any state in whic imes as required by state law.	ch this notice is filed, a notice on	
3 The undersigned issuer hereby und issuer to offerees.	ertakes to furnish to the state administrators, upon written reque	est, information furnished by the	
limited Offering Exemption (ULO	nat the issuer is familiar with the conditions that must be satisfed of the state in which this notice filed and understands that the establishing that these conditions have been satisfied.		
The issuer has read this notification and andersigned duly authorized person.	knows the contents to be true and has duly caused this notice to	o be signed on its behalf by the	
ssuer (Print or Type)	Signature	Date	7
Voyager Entertainment Internation		1/2-	16-07
Name of Signer (Print or Type)	Title of Signer (Print or Type)		_
Richard I. Hanninan Sr	President CFO		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed. signatures.

	APPENDIX											
1	Type of Security and aggregate to non-accredited investors in State (Part B - Item 1) Type of Security and aggregate offering price offered in state (Part C - Item 1)				Type of investor and amount purchased in State (Part C - Item 2)							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
AL	,											
AK												
AZ		<u> </u>										
AR												
CA												
со								<u> </u>				
СТ								_				
DE												
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IA		<u> </u>										
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LA	<u> </u>	 	-	 	 			1				
ME		 				- 			†			
MD	†				 				-			
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MI	 	1	 					†	 			
MN		 	 					 	 			
MS	 				 			 	1			
MO	1		1	_1	<u></u>		<u> </u>	<u> </u>	1			

<u> </u>		_			APPE	NDIX						
1	Intend to non-a investor	to sell ccredited s in State - Item 1)	Type of So and aggr offering offered in (Part C - I	egate price state	Type of investor and amount purchased in State (Part C - Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E - Item 1)		
State	Yes	No			Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
МТ												
NE												
NV			common \$2	200,000	11	\$ 200,000.00	_	N/A		х		
NH												
NJ												
NM					· · · · · · · · · · · · · · · · · · ·							
NY												
NC												
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